COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION AND POWER OF ATTORNEY

 □ Declaration Submitted with Initial Filing OR □ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required) 				
As a below named inventor, I hereby declare that:				
My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:				
USE OF CRIPTO-1 AS A BIOMARKER FOR NEURODEGENERATIVE DISEASE AND METHOD OF INHIBITING PROGRESSION THEREOF				
the specification of which:				
is attached hereto. was filed on March 30, 2006 as Application No. 10/574,645 and was amended on applicable). (if				
was filed by Express Mail No. as Application No. not known yet, and was amended on				
(if applicable). was filed on as PCT International Application No. PCT/ and was amended on (if any).				
I state that I have reviewed and understand the contents of the specification identified above, including the claim(s), as amended by any amendment referred to above.				
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.				
I claim foreign priority benefits under 35 USC 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application(s) designating at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application(s) for patent, utility model, design registration, inventor's or plant breeder's rights certificate(s), or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter and having a filing date before that of the application(s) from which				
the benefit of priority is claimed.				
Die Ferrier Ditte Date Disaite Claimed Certified Communication				
Prior Foreign Application Number(s) Proreign Filing Date Priority Claimed Certified Copy Attached? (MM/DD/YYYY) YES NO YES NO				

As a named inventor, I hereby appoint the attorneys and patent agents of the National Institutes of Health, Office of Technology Transfer, and of Leydig, Voit & Mayer, Ltd., who are identified with the following Customer Number, to prosecute this application and transact all business in the U.S. Patent and Trademark Office connected therewith:

45733

I further direct that correspondence concerning this application be directed to Leydig, Voit & Mayer, Ltd., as Customer Number:

45733

I declare that all statements made herein of my own knowledge are true, that all statements made on information and belief are believed to be true, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or Arst inventor: David Salomon

Inventor's signature

Date

12, 2000

Country of Citizenship: United States

Residence: // Frederick, Maryland

(city/state or country)

Post Office Address:

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Full name of second joint inventor, if any: Nancy Berman	
Inventor's signature	
Date	Country of Citizenship: United States
Residence: Leawood, Kansas (city/state or country)	
Post Office Address: 12809 Pembroke Circle, Leawood, Kansas 66209 (complete mailing address)	

Full name of third joi	nt inventor, if any: Edward Stephens	
Inventor's signature		
Date		Country of Citizenship: United States
Residence: Kar (city/state or country)	3,	
Post Office Address: (complete mailing ad	5109 NW 58th Street, Kansas C	ity, Missouri 64151

DHHS Ref. No. E-075-2003/0-US-03

COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION AND POWER OF ATTORNEY

☐ Declaration Submitted ☐ Declaration Submitted		ng OR ng (surcharge (37 CFR 1	.16(e)) requi	red)	
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the specification of which:					
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Prior Foreign		Foreign Filing Date	Priority C		Certified Copy Attached?
Application Number(s)	Country	(MM/DD/YYYY)	YES	NO	YES NO
					<u> </u>

As a named inventor, I hereby appoint the attorneys and patent agents of the National Institutes of Health, Office of Technology Transfer, and of Leydig, Voit & Mayer, Ltd., who are identified with the following Customer Number, to prosecute this application and transact all business in the U.S. Patent and Trademark Office connected therewith:

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Full name of sole or first inventor: David Salomon			
Inventor's signature			
Date	Country of Citizenship: United States		
Residence: Frederick, Maryland (city/state or country)			
Post Office Address: 1187 Stillwater Court, Frederick, No. (complete mailing address)	Maryland 21702		

Full name of second joint inventor, if any: Nancy Berman

Inventor's signature

Date 6 | 11 | 0 6 | Country of Citizenship: United States

Residence: Leawood, Kansas (city/state or country)

Post Office Address: 12809 Pembroke Circle, Leawood, Kansas 66209 (complete mailing address)

Full name of third joint inventor, if any; Edward Stephens

Inventor's signature

Date 5/11/06

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Residence:

Kansas City, Missouri

(city/state or country)

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